

Credit Card Authorization Form

I, _____ give my permission to Xylan Logistics Ltd. to process the credit card below
for the invoice total amount of: _____ in USD | CAD Funds (please circle one).

Customer Information

Customer Name:

Company Name:

Customer Phone Number:

Customer Email:

Card Holder Information

Name on Card:

Card Type:

Issuing Bank:

Card Number:

CVV Code:

Expiry Date (MM/YY):

Credit Card Billing Address:

Card Holder Phone Number:

Card Holder
Signature: _____ Date: _____

